PTO/SB/31 (09-06)
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| NOTICE OF APPEAL FROM THE EXAMINER TO | | Docket Number (Optional) |
| THE BOARD OF PATENT APPEALS AND INTERFERENCES | | 0630-1951P |
| In re Application of | | |
| | Lee-Yeun HWANG | |
| | 200 1001111111111 | |
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| | Application Number | Filed |
| | 1 | 1 |
| | 10/767,203-Conf. #5731 For HIGH VOLTAGE DEVICE | January 30, 2004 |
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| TRENCH AND FABRICATING METHOD THEREOF | | |
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| | A.L.I.t. | I 2000 |
| | Art Unit | Examiner |
| | 2813 | H. A. Doty |
| Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner. The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ 500.00 | | |
| | | |
| Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: | | |
| A check in the amount of the fee is enclosed. | | |
| Payment by credit card. Form PTO-2038 is attached. | | |
| The Director has already been authorized to charge fees in this application to a Deposit Account I have enclosed a duplicate copy of this sheet. | | |
| The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No 02-2448 I have enclosed a duplicate copy of this sheet. | | |
| X A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed | | |
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| I am the | | 1 / 200 1 |
| applicant /inventor | | James L. Eller J. |
| | | Signature |
| assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) | | |
| is enclosed. (Form PTO/S | | V James T. Eller, Jr.⊓ |
| | | Typed or printed name |
| x attorney or agent of record | | |
| L | ,538 | |
| Troglossosion rightsbot | 1000 | (703) 205-8000 |
| attorney or agent acting unde | er 37 CFR 1.34 | Telephone number |
| Registration number if acting ur | | October 6, 2006 |
| respectation number it being of | 100 01 01 1 0T | Date |
| | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required Submit multiple forms if more than one signature is required, see below*. | | |
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| *Total of 1 forms are submitted | | |

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